

EXHIBIT 13



PERSONNEL ACTION REQUEST

PC-1101B

EMPLOYEE ID	SSN/SIN	FIRST NAME	MI	LAST NAME
01155481	521282725	Marlayna	G.	Tillman

ACTION CODES (Check appropriate action)

EFFECTIVE DATE:	10/20/02	TERMINATION DATE:		LAST DATE WORKED:	
<input type="checkbox"/> HIRE	<input type="checkbox"/> TRANSFER	<input type="checkbox"/> LEAVE (PAID)	<input type="checkbox"/> TERMINATION		
<input type="checkbox"/> REHIRE	<input type="checkbox"/> PAY	<input type="checkbox"/> LEAVE (UNPAID)	<input type="checkbox"/> RETIREMENT		
<input type="checkbox"/> POSITION CHANGE	<input type="checkbox"/> DATA (MISC)	<input checked="" type="checkbox"/> RETURN FROM LEAVE			

REASON:	REF/PDL	POSITION #:
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FILL IN APPROPRIATE ACTION INFORMATION

COMPANY	BUSINESS UNIT	DEPARTMENT	LOCATION (Work)
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JOB TITLE		JOB CODE	REG/TEMP	REGULAR	TEMPORARY
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FULL/PART	EMPLOYEE CLASS	SHIFT
<input type="checkbox"/> FULL-TIME	<input type="checkbox"/> INTERN	<input type="checkbox"/> DAY (1)
<input type="checkbox"/> PART-TIME	<input type="checkbox"/> SEASONAL	<input type="checkbox"/> EVENING (2)
		<input type="checkbox"/> NIGHT (3)

STANDARD HOURS	CONTRACT TYPE	SEVERANCE ST OR STL	RELOCATION	SIGN-ON \$	GRANDFATHERED
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UNION LOCAL	SERVICE DATE (Vesting)
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PAYGROUP	EMPLOYEE TYPE	EXCEPTION HOURLY	HOURLY	BALANCED	GL PAY TYPE (COST CENTER/FRANCHISE)	ACCOUNT CODE (LABOR)
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GRADE (BAND/LEVEL)	PERFORMANCE RATING	ABOVE TARGET	ON TARGET	BELOW TARGET
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COMPENSATION FREQUENCY	ANNUAL	HOURLY	WEEKLY	COMPENSATION RATE	\$	INCR. AMOUNT/PERCENT
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CDL/CDL DRIVERS LICENSE DATA		TCDL: CDL TRAINEE/LEARNER'S PERMIT		OTHER DRIVERS LICENSE DATA	
<input type="checkbox"/> ACDL >26K CLASS A/TRAILER >10K	<input type="checkbox"/>	<input type="checkbox"/> D10K: 10K-26K	<input type="checkbox"/>	<input type="checkbox"/> NON: NON-COMMERCIAL LICENSE	
<input type="checkbox"/> BCDL >26K CLASS B/TRAILER <10K	<input type="checkbox"/>	<input type="checkbox"/> X: BOTH H & H -	<input type="checkbox"/> T: DOUBLE TRAILER	<input type="checkbox"/> INS: PERSONAL INSURANCE REQUIRED FOR JOB	
CDL ENDORSEMENTS (IF APPL):		<input type="checkbox"/> H: HAZMAT	<input type="checkbox"/> N: TANKER	<input type="checkbox"/> ETC	REG'D 10-24-02

COMMENTS		ADP 10-24
		EDMS 10-24
		ETC 10-24

PBG 00052

APPROVALS

SUPERVISOR SIGNATURE	DATE	APPROVING MGR SIGNATURE	DATE	HR/HRD SIGNATURE	DATE
<i>Y. S. Clinton</i>	10-24-02			<i>Tracy Depewicki</i>	10/18/02